

**WAXAHACHIE INDEPENDENT SCHOOL DISTRICT  
- Student Travel Request Form -**

**TRAVELER INFORMATION**

Name \_\_\_\_\_  
 Campus/Department \_\_\_\_\_  
 Departure Date \_\_\_\_\_ Time \_\_\_\_\_  
 Return Date \_\_\_\_\_ Time \_\_\_\_\_  
 Other Sponsors Traveling \_\_\_\_\_

**EVENT INFORMATION**

Title \_\_\_\_\_  
 Description/Purpose \_\_\_\_\_  
 Destination \_\_\_\_\_  
 Start Date \_\_\_\_\_ Time \_\_\_\_\_  
 End Date \_\_\_\_\_ Time \_\_\_\_\_

**REQUEST OVERVIEW & JUSTIFICATION**

Please indicate the type of travel you are requesting:

- Tier I - School-Affiliated Sanctioned Competition Travel (UIL, etc.)  
 Tier II - School-Affiliated Discretionary Field Trip, Performance Trip, or Reward Trip Travel

Substitute Required? Yes  No

Departure takes place during the school day:

List of eligible, participating students is included:

Additional documentation is included:

Please indicate the distance of travel you are requesting:

- In-District / Local  
 Out-of-District, In-State  
 Out-of-State

If Out-of-District, what city?

If Out-of-State, what state?

If interscholastic, Is this request for **entry level** or **playoff** (advancing round) travel:

Entry Level                       Playoff Level

If Playoff, what level?

- Bi-District  
 Area  
 Regional (Reg. Tourney)  
 State (State Tourney)

What mode of transportation will you be using for the travel?

Bus or School Transportation                       Charter, Rental or Other Method

**Trip Details or Considerations for Authorization**

**\*\*TRAVEL REQUEST IS NOT APPROVED UNTIL FORM IS RECEIVED BY REQUESTOR WITH ALL REQUIRED SIGNATURES.\*\***

**AUTHORIZATION**

Employee _____	Date _____
Principal _____	Date _____
Program Director _____	Date _____
Assistant Supt.* _____	Date _____
Superintendent** _____	Date _____

Check Here if request is for Out-of-State Trip requiring Board Approval:

**NOTES**

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>+ Employees must ensure funds are available prior to requesting permission to travel.</li> <li>+ This form must be authorized prior to completing any further travel paperwork regarding student travel.</li> <li>+ Any schedule, dates, times or agendas must be attached to this form to justify requested time frame of travel.</li> <li>+ All travel must follow the approved administrative guidelines for student travel.</li> </ul> | <ul style="list-style-type: none"> <li>+ Bus reservation may be made upon completion and approved receipt of this form.</li> </ul> <p><b>Signature Authorization Requirements:</b></p> <ul style="list-style-type: none"> <li>&gt; Local Travel requires Principal and Program Director authorization.</li> <li>&gt; Intrastate Travel requires Principal, Director &amp; Assistant Supt. authorization.</li> <li>&gt; Out-of-State Travel requires all signatures and documented Board authorization.</li> <li>&gt; <b>Travel is not approved until form is returned with all authorizing signatures.</b></li> </ul> |
|---|---|

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**ELIGIBLE STUDENT PARTICIPANT LIST**

**\*Please complete list below or, if more than 25 students, please attach a pre-filled list of eligible participants.**

1. \_\_\_\_\_ ID#: \_\_\_\_\_
2. \_\_\_\_\_ ID#: \_\_\_\_\_
3. \_\_\_\_\_ ID#: \_\_\_\_\_
4. \_\_\_\_\_ ID#: \_\_\_\_\_
5. \_\_\_\_\_ ID#: \_\_\_\_\_
6. \_\_\_\_\_ ID#: \_\_\_\_\_
7. \_\_\_\_\_ ID#: \_\_\_\_\_
8. \_\_\_\_\_ ID#: \_\_\_\_\_
9. \_\_\_\_\_ ID#: \_\_\_\_\_
10. \_\_\_\_\_ ID#: \_\_\_\_\_
11. \_\_\_\_\_ ID#: \_\_\_\_\_
12. \_\_\_\_\_ ID#: \_\_\_\_\_
13. \_\_\_\_\_ ID#: \_\_\_\_\_
14. \_\_\_\_\_ ID#: \_\_\_\_\_
15. \_\_\_\_\_ ID#: \_\_\_\_\_
16. \_\_\_\_\_ ID#: \_\_\_\_\_
17. \_\_\_\_\_ ID#: \_\_\_\_\_
18. \_\_\_\_\_ ID#: \_\_\_\_\_
19. \_\_\_\_\_ ID#: \_\_\_\_\_
20. \_\_\_\_\_ ID#: \_\_\_\_\_
21. \_\_\_\_\_ ID#: \_\_\_\_\_
22. \_\_\_\_\_ ID#: \_\_\_\_\_
23. \_\_\_\_\_ ID#: \_\_\_\_\_
24. \_\_\_\_\_ ID#: \_\_\_\_\_
25. \_\_\_\_\_ ID#: \_\_\_\_\_